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APPLICANTS *pu*

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** CONTINUING DATA ***** *pu*

** FOREIGN APPLICATIONS ***** *pu*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
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Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged	STATE OR COUNTRY NJ	SHEETS DRAWING 7	TOTAL CLAIMS 35	INDEPENDENT CLAIMS 6
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Examiner's Signature *pu* Initials *W*

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TITLE
 Actuating handle assembly

FILING FEE RECEIVED 1428	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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